

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

10826326

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS                     |    |              |                          |
|----------------------------------|----|--------------|--------------------------|
| FOR                              |    | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 18 | minus 20 =   |                          |
| INDEPENDENT CLAIMS               | 2  | minus 3 =    |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |    |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                                     |
|--|---|-------|---|------------------|-------------------------------------|
|  |   |       |   |                  |                                     |
| Total  | 19  | Minus | 20  | =                | <input checked="" type="checkbox"/> |
| Independent                                    | 2   | Minus | 3   | =                | <input checked="" type="checkbox"/> |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  | <input type="checkbox"/>            |

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| XS 9=     |        | OR XS18=     |        |
| X43=      |        | OR X86=      |        |
| +145=     |        | OR +290=     |        |
| TOTAL     |        | OR TOTAL     | 770    |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | XS18=              |                        |
| X43=               |                        | X86=               |                        |
| +145=              |                        | +290=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                          |
|--|---|--|---|------------------|--------------------------|
|  |   |  |   |                  |                          |
| Total  | Minus                                     |  |   | =                |                          |
| Independent                                    | Minus                                     |  |   | =                |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |   |                  | <input type="checkbox"/> |

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | XS18=              |                        |
| X43=               |                        | X86=               |                        |
| +145=              |                        | +290=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |                          |
|--|---|--|---|------------------|--------------------------|
|  |   |  |   |                  |                          |
| Total  | Minus                                     |  |   | =                |                          |
| Independent                                    | Minus                                     |  |   | =                |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |   |                  | <input type="checkbox"/> |

| RATE               | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|--------------------|------------------------|
| X\$ 9=             |                        | XS18=              |                        |
| X43=               |                        | X86=               |                        |
| +145=              |                        | +290=              |                        |
| TOTAL<br>ADDT. FEE |                        | TOTAL<br>ADDT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.